Best Available Copy

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

097554064

| CLAIMS AS FILED - PART I (Column 1) | | | | | | (Column 2) | | SMALL ENTITY TYPE | | OR | OTHER THAN | | |
|--|--|---|--------------|-----------------------|----------------------|--------------------|----|---------------------------------------|------------------------|-----------|----------------|------------------------|--|
| TOTAL CLAIMS | | | | | , | | Γ | RATE | FEE | | RATE | FEE | |
| FO | R | | NUMBER FILED | | NUMBER EXTRA | | В | ASIC FEE | 355.00 | OR | BASIC FEE | 710.00 | |
| TOTAL CHARGEABLE CLAIMS | | | 31 minus 20= | | * | 11 | | X\$ 9= | | OR | X\$18= | 198. | |
| INDEPENDENT CLAIMS | | | | nus 3 = | * | 1 | r | X40= | | OR | X80= | 80, | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | r | +135= | | OR | +270= | | |
| * If the difference in column 1 is less than zero, enter | | | | | r "0" in c | olumn 2 | L | TOTAL | | , , | TOTAL | 988,- | |
| CLAIMS AS AMENDED - PAR | | | | | | | | • | NTITY | OR | OTHER SMALL | THAN | |
| | | (Column 1) CLAIMS | 1 | (Colu | | (Column 3) | | SMALL E | | OH I I | SWALL | | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | | NUM PREVIO PAID | BER OUSLY | PRESENT : EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | • | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | , | |
| | Independent | * | Minus *** | | | = | | X40= | | OR | X80= | | |
| Ĺ | FIRST PRESE | NTATION OF M | JUIPLE DEF | ENDEN | CLAIM | | | +135= | | OR | +270= | | |
| | | | | | | | | TOTAL ODIT. FEE | | OR | TOTAL | | |
| | (Column 1) (Column 2) (Column 3) | | | | | | | | | , | ADDIT. FEE | | |
| | | (Column 1) CLAIMS | | | HEST | (Column 5) | | | ADDI- | 1 | | ADDI- | |
| AMENDMENT B | | REMAINING AFTER AMENDMENT | | PREVI | IBER OUSLY FOR | PRESENT EXTRA | | RATE | TIONAL FEE | | RATE | TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| | Independent | pendent • Minus ••• T PRESENTATION OF MULTIPLE DEPEND | | *** | T CL AINA | = | Γ | X40= | | OR | X80= | | |
| <u> </u> | FIRST PRESE | NTATION OF MI | JUIPLE DEF | ENDEN | CLAIN | | | +135= | | OR | +270= | 1 | |
| | | | | | | | | TOTAL | | OR | TOTAL | | |
| | | (Oaksee 4) | | (Cale | O\ | (Column 2) | AL | DDIT. FEE | | l | ADDIT. FEE | | |
| _ | | (Column 1) |] | | mn 2) HEST | (Column 3) | _ | · · · · · · · · · · · · · · · · · · · | 4001 | 1 | | 4001 | |
| AMENDMENT C | | REMAINING AFTER AMENDMENT | • | NUM PREVI | IBER OUSLY FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | • | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| | Independent | • | Minus | | | = | | X40= | | OR | X80= | | |
| Ľ | FIRST PRESE | T CLAIM | | - | | | | | | | | | |
| +135= * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | | OR | +270= | | |
| •• | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |